

VVFC VACCINE POLICIES & RECOMMENDATIONS



Anyone receiving VVFC vaccine **MUST** be VVFC eligible.

Diphtheria, Tetanus, and acellular Pertussis (DTaP)

Recommendations: all children 6 weeks through 6 years of age

Recommended Schedule

Dose	Age
1	2 months
2	4 months
3	6 months
4	15-18 months

Booster: 4 to 6 years

This booster is not necessary if the 4th dose of vaccine is administered on or after the 4th birthday.

Pediatric DT: If a child has a contraindication to pertussis vaccine, pediatric DT should be used to complete the vaccination series.

Haemophilus influenzae type b (Hib)

Recommendations: all children 6 weeks to 5 years of age

Recommended Schedule

Three or four doses of Hib vaccine should be administered by 2 years of age.

Schedule 1

Dose	Age
1	2 months
2	4 months
3	6 months
Booster	12-15 months

Schedule 1 is for HibTiter, ACTHib, Hib vaccines containing HbOC or PRP-T, or where more than one brand of vaccine was used.

Schedule 2

Dose	Age
1	2 months
2	6 months
Booster	12-15 months

Schedule 2 is for PedvaxHib, Comvax, and Hib vaccines containing PRP-OMP.

Hepatitis A

Recommendations: all children 12 months to 18 years of age

Recommended Schedule

Dose	Age
1	12-23 months
2	6 months later

Hepatitis B

Recommendations: all children less than 19 years of age

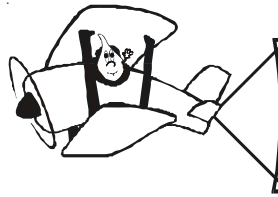
Recommended Schedule

Dose	Age	Interval
1	Birth	4 weeks
2	1-2 months	8 weeks
3	6-18 months	---

Alternative Schedule

Adolescents 11-15 years old

Dose	Interval
1	4-6
2	months



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HPV

Recommendations: HPV is routinely recommended at 11-12 years of age, however, doctors may administer it to girls as young as 9 years of age

Recommended Schedule

First dose now, then second dose 2 months after first, and third dose 6 months after first.

Influenza

Recommendations: all children 6 months through 59 months and their household contacts
high risk children 5 through 18 years and their household contacts

Recommended Schedule

ANNUALLY, 2-4 months pre-season

Children 6 months-9 years old receiving Influenza vaccine for the first time should receive a 2nd dose given at least 1 month apart.

MCV4

Recommendations: all children at their pre adolescent visit (11-12 years of age)

Recommended Schedule

<u>Dose</u>	<u>Interval</u>
1	---
Single dose	

Measles, Mumps, and Rubella (MMR)

Recommendations: all children 12 months through 18 years of age

Recommended Schedule

<u>Dose</u>	<u>Age</u>
1	12-15 months
2	4-6 years

Pneumococcal Conjugate (PCV-7)

Recommendations: all children less than 24 months and high risk children 24-59 months
Pneumococcal Conjugate vaccine is not recommended for children over 60 months of age.

Recommended Schedule less than 24 months

<u>Dose</u>	<u>Age</u>
1	2 months
2	4 months
3	6 months
4	12-15 months

Recommended Schedule 24-59 months

<u>Dose</u>	<u>Interval</u>
1	---
Single dose	

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Poliomyelitis (IPV)

Recommendations: all children 6 weeks through 18 years of age

Recommended Schedule	
<u>Dose</u>	<u>Age</u>
1	2 months
2	4 months
3	6-18 months
4	4-6 years

Rotavirus

Recommendations: all children 6 weeks to 32 weeks

Children should have all doses by 32 weeks of age. If any dose was RotaTeq or unknown, a total of three doses should be given.

Recommended Schedule	
<u>Dose</u>	<u>Age</u>
1	2 months
2	4 months
3	6 months if using RotaTeq

Tetanus (Td) and Tdap

Tdap is preferred over Td as adolescents are susceptible to pertussis due to waning immunity. A Tdap or Td booster is recommended at any age from 11 through 18 years if they have completed the recommended childhood DTaP vaccination series and have not received a Td dose.

Recommended Schedule	
<u>Dose</u>	<u>Interval</u>
1	---
Single dose	

Varicella

Recommendations: all children 12 months through 18 years of age

Recommended Schedule	
<u>Dose</u>	<u>Age</u>
1	12-15 months
2	4-6 years